



Iowa Department of Human Services

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INFORMATIONAL LETTER NO.1532

DATE: August 3, 2015

TO: All Iowa Medicaid Providers Excluding Dental, Pharmacy and Individual Consumer Directed Attendant Care (CDAC)

FROM: The Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Preparation for ICD-10 Implementation

There are less than 60 days until ICD-10 Implementation.

End-to-End Testing Opportunities:

The IME offers two testing tools without charge: (1) Collaborative Testing Tool (CollabT) and (2) Direct Claims Submittal via [EDISS Connect](#)¹. Healthcare providers, external billing entities and clearinghouses are welcome to submit test claims. The IME has three (3) test cycles available.

Testing Cycles	Claims Testing	
	Start	Finish
Test Cycle 10	Wed 8/12/15	Wed 8/26/15
Test Cycle 11	Wed 9/2/15	Wed 9/16/15
Test Cycle 12	Wed 9/23/15	Wed 10/7/15

Provider Preparation:

The IME recommends that providers begin testing immediately. The Centers for Medicare and Medicaid Services (CMS) has highlighted five (5) recommendations to help begin testing (source www.cms.gov/ICD10):

- **Why Test Now:** Testing is vital to ensure that providers can create and submit claims using ICD-10-CM (diagnosis codes) and ICD-10-PCS (inpatient procedure codes) once we reach the compliance date. Testing is one of the best ways to avoid potential cash flow issues.
- **How to Get Started:** While ICD-10 is almost here, there is still time to prepare:
 - Verify that ICD-10-ready systems are able to:
 - ✓ Generate a claim
 - ✓ Code a patient encounter
 - Test systems and workflow processes using ICD-10-CM and ICD-10-PCS codes. Testing can be done:
 - ✓ Inside a provider practice
 - ✓ With vendors, clearinghouses, billing services, and health plans

¹ <https://connect.edissweb.com/>

- **Testing with Trading Partners:** Test with vendors, clearinghouses, billing services, and health plans to:
 - Verify the ability to submit, receive and process data with ICD-10-CM and ICD-10-PCS codes
 - Understand how ICD-10 updates affect the transactions submitted
 - Identify and address specific issues before October 1, 2015
- **Types of Testing:** There are two (2) types of testing:
 - *Acknowledgement Testing:* Providers and other submitters submit claims with ICD-10-CM and ICD-10-PCS codes and ICD-10 companion qualifiers. While claims are not adjudicated, submitters receive an acknowledgement that their claim was accepted or rejected.
 - *End-to-End Testing:* During end-to-end testing, providers submit claims containing valid ICD-10-CM and ICD-10-PCS codes. Health plans process the claims through system edits to return an electronic remittance advice (ERA).
- **Testing Tips:** To get the most out of testing, providers should:
 - Review testing requirements to understand the scope and format of the testing available
 - Focus on the highest-risk scenarios, such as claims processing and the diagnoses seen most often
 - Avoid common billing errors, such as:
 - ✓ An invalid National Provider Identifier (NPI)
 - ✓ Invalid Health Care Procedure Coding System (HCPCS) codes on professional claims
 - ✓ Invalid postal ZIP codes on professional claims
 - The IME has also identified common testing errors, such as:
 - ✓ Testing unregistered NPIs
 - ✓ Lack of registration for the 835 (electronic remittance advice)
 - ✓ Failure to change ICD-9 qualifiers to the appropriate ICD-10 qualifiers
 - ✓ Review [Iowa Medicaid ICD-10 Testing Tips](#) for additional information.

To register for testing, please complete the [ICD-10 External Testing Registration](#)² form. You may also register for testing by contacting the IME Provider Services Unit at 1-800-338-7909, (Option 1 and 7) or by email at: ICD-10project@dhs.state.ia.us.

² <https://dhs.iowa.gov/sites/default/files/470-5312.pdf>